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Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 617-6381

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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DIVISION OF CORPORATIONS
2013 SEP 25 AM 11:00**

**FLORIDA PROFIT/NON PROFIT CORPORATION
LK SHAD2 CORPORATION**

Certificate of Status	0
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Corporate Filing Menu

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COVER LETTER

Department of State
New Filing Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: LK Shad2 Corporation

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Sam R. Thomas/Sam E. Thomas & Associates

Name (Printed or typed)

3715 Northside Pkwy NW, Bldg 400 - Ste 650

Address

Atlanta, Georgia 30327

City, State & Zip

404-350-8337

Daytime Telephone number

stthomas520@aol.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: LK Shad2 Corporation

ARTICLE II PRINCIPAL OFFICE

Principal street address

3715 Northside Pkwy NW

Bldg. 100 - Ste 325

Atlanta, GA 30327

Mailing address, if different is:

3715 Northside Pkwy NW

Bldg 100 - Ste 325

Atlanta, GA 30327

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To be a Member of the Strand Lake Shadow, LLC.

and to invest in or to lend funds to Strand Lake Shadow, LLC.

ARTICLE IV SHARES 75,000

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: John D.L. Mackay - Director

Address: #2160-650 West Georgia St.
Vancouver, B.C.
V6B 4N7

Name and Title: James A. Johnston-President & Secretary

Address: #2160-650 West Georgia St.
Vancouver, B.C.
V6B 4N7

Name and Title: Maria Sly - Vice President

Address: #2160-650 West Georgia St.
Vancouver, B.C.
V6B 4N7

Name and Title: James A. Johnston- Director

Address: #2160-650 West Georgia St.
Vancouver, B.C.
V6B 4N7

Name and Title: Roderick G. Saunders-Vice President Secretary

Address: #2160-650 West Georgia St.
Vancouver, B.C.
V6B 4N7

Name and Title:

Address:

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DIVISION OF CORPORATIONS

2013 SEP 25 AM 11:00

(cont.)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: C T Corporation System
Address: 1200 South Pine Island Road
Plantation, FL 33324

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Sam E. Thomas & Associates
Address: 3715 Northside Pkwy NW B400-650
Atlanta, GA 30327

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

By: Sierra Burris 9/24/13
Required Signature/Registered Agent President & Assistant Secretary Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.133, F.S.

Sam E. Thomas 9/24/13
Required Signature/Incorporator Date
Sam E. Thomas